## PART B - FEE(S) TRANSMITTAL

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indicated timiess corrected below or directed otherwise in Block 1, by (a) specifying a new maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailian		
31496	31496 7590 01/20/2011			Fee(s) Transmittal. This certificate cannot be used for domestic mailings of the papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
SMITH PATENT CONSULTING, LLC 515 East Braddock Road Suite B ALEXANDRIA, VA 22314				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
,	and the second s					(Depositor's name)
						(Signanire)
APPLICATION NO.	FILING DATE					(Date)
10/594,455	06/22/2007		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
TITLE OF INVENTION: F		VON WILLEBRAND F	Michael Kretschmar ACTOR PREPARATION	USING HYDROXY	LNK-020 LAPATITE	9277
APPLN. TYPE	SMALL ENTITY	TOOTE COT NAME				
nonprovisional	NO	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
EXAMIN		\$1510	\$300	\$0	21810	04/20/2011
KIM, ALEXAS		ART UNIT	CLASS-SUBCLASS			
1. Change of correspondence		1656	530-413000			**************************************
CFR 1.363).  Change of correspond Address form PTO/SB/12		,	For printing on the part (1) the names of up to or agents OR, alternative	3 registered natent		HTIMZ M
"Fee Address" indication (or "Tee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the same of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is isted, no name will be printed.			
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PLEASE NOTE: Unless recordation as set forth in	an assignee is identif 37 CFR 3.11. Comple	ied below, no assignce etion of this form is NO	data will appear on the pall a substitute for filing an a	ent. If an assignee	is identified below, the do	ocument has been filed for
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BIOTE ST	AG		DRE 16 1CH	i, Geri	Y CAN	
Please check the appropriate	assignee category or c	ategories (will not be pri	inted on the patent);	ndividual 🚨 Corp	poration or other private gro	up entity Government
4a. The following fee(s) are s  Issue Fee	ubmitted:	46	Payment of Fce(s); (Pleas		previously paid issue fee s	
Publication Fee (No sn	tall entity discount ne		A LUCCK IS ENGIOSED.			
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NOTE: The Issue Fee and Puinterest as shown by the recor	dication Fee (if require	ad mill and be a series		applicant; a registe	red attorney or agent; or the	assignee or other party in
Authorized Signature	Carl	W-			MARCH 30,2	
Typed or printed name	CHALIN	SMITH		Panistration M.	41,569	200 N B
This collection of information an application. Confidentiality submitting the completed app this form and/or suggestions f Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-1-	is required by 37 CFR is governed by 35 U. Ecation form to the U or reducing this burde a 22313-1450. DO N	1.311. The information S.C. 122 and 37 CFR 1 SPTO. Time will vary on, should be sent to the OT SPNO FFES OR CO	is required to obtain or retr. 14. This collection is estimated in the second of the collection is estimated. Chief Information Officer,	in a hanafit hy tha	on Ella milia i i a con di un	by the USPTO to process) gathering, preparing, and e you require to complete ment of Commerce P.O.